

IN RE:

Chutron, Anna

Debtor(s)

Case No. \_\_\_\_\_

Chapter 7

**VERIFICATION OF CREDITOR MATRIX**

Number of Creditors 37

The above-named Debtor(s) hereby verifies that the list of creditors is true and correct to the best of my (our) knowledge.

Date: May 22, 2017

/s/ Anna Chutron

Debtor

Joint Debtor

Advocate Medical Group  
8550 W Bryn Mawr Ave Fl 8  
Chicago, IL 60631-3200

Amex  
PO Box 297871  
Fort Lauderdale, FL 33329-7871

Amex  
Correspondence  
PO Box 981540  
El Paso, TX 79998-1540

Anesthesiologists LTD  
PO Box 3871  
Carol Stream, IL 60132-3871

At T Midwest  
c/o IC System Inc.  
444 Highway 96 E  
Saint Paul, MN 55127-2557

Bank of America  
NC4-105-03-14  
PO Box 26012  
Greensboro, NC 27420-6012

Bk of Amer  
4909 Savarese Cir  
Tampa, FL 33634-2413

BMO Harris  
Attn: Bankruptcy  
770 N Water St  
Milwaukee, WI 53202-0002

Bmo Harris Bank NA  
PO Box 94934  
Palatine, IL 60069

Capital One  
15000 Capital One Dr  
Richmond, VA 23238-1119

Capital One  
Attn: Bankruptcy  
PO Box 30253  
Salt Lake City, UT 84130-0253

Capital One  
PO Box 98873  
Las Vegas, NV 89193-8873

Chase Bank  
PO Box 15298  
Wilmington, DE 19850-5298

Citibank  
PO Box 6500  
Sioux Falls, SD 57117-6500

Collins Asset Group  
5725 W Highway 290 Ste 1  
Austin, TX 78735-8720

Comcast Central Warehouse  
c/o Credit management LP  
PO Box 118288  
Carrollton, TX 75011-8288

Credit Management Lp  
4200 International Pkwy  
Carrollton, TX 75007-1912

Du Page Emergency Physicians  
PO Box 366  
Hinsdale, IL 60522-0366

Edward Hospital  
c/o Merchants Credit Guide  
223 W Jackson Blvd Ste 700  
Chicago, IL 60606-6914

Emilia Zivoin  
437 N Wesley Dr  
Addison, IL 60101-2131

Fia Card Services N.A.  
c/o Midland Funding LLC Attn.:Bankruptcy  
PO Box 939069  
San Diego, CA 92193-9069

I C System Inc  
PO Box 64378  
Saint Paul, MN 55164-0378

ICS Inc  
PO Box 1010  
Tinley Park, IL 60477-9110

IICRDP-Integrated Imaging Consultants  
44000 Garfield Rd  
Clinton Township, MI 48038-1125

Jozef Krzyciak  
c/o Keis George LLC  
1 N La Salle St # 2046  
Chicago, IL 60602-3926

Merchants Credit Guide  
223 W Jackson Blvd Ste 4  
Chicago, IL 60606-6908

Midland Funding  
c/o Blitt & Gaines  
661 Glenn Ave  
Wheeling, IL 60090-6017

Midland Funding  
2365 Northside Dr Ste 30  
San Diego, CA 92108-2709

Midland Funding  
c/o Kevin Mortel & Toni Miller, Attys  
1821 Walden Office Sq Ste 400  
Schaumburg, IL 60173-4273

Midwest Diagnostic Pathology, SC  
PO Box 578  
Park Ridge, IL 60068-0578

Nissan Motor Acceptance Corpor  
c/o Collins Aset Group  
5725 W Highway 290 Ste 1  
Austin, TX 78735-8720

Northwestern Medicine  
c/o Nationwide Credit & Collection, Inc.  
815 Commerce Dr Ste 270  
Oak Brook, IL 60523-8852

Portfolio Recovery Ass  
120 Corporate Blvd Ste 1  
Norfolk, VA 23502-4952

River Shore Condo Association  
c/o Vanguard Property Management  
50 Commerce Dr Ste 110  
Schaumburg, IL 60173-5308

Unique National Collections  
119 E Maple St  
Jeffersonville, IN 47130-3439

Village of Westmont  
31 W Quincy St  
Westmont, IL 60559-1865

Westmont Public Library  
428 N Cass Ave  
Westmont, IL 60559-1502

Fill in this information to identify your case:

United States Bankruptcy Court for the:

NORTHERN DISTRICT OF ILLINOIS, EASTERN DIVISION

Case number (if known)

Chapter you are filing under:

- Chapter 7
- Chapter 11
- Chapter 12
- Chapter 13

Check if this is an amended filing

Official Form 101

**Voluntary Petition for Individuals Filing for Bankruptcy**

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, “Do you own a car,” the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

**Part 1: Identify Yourself**

**About Debtor 1:**

**1. Your full name**

Write the name that is on your government-issued picture identification (for example, your driver's license or passport).

**Anna**

First name

Middle name

Bring your picture identification to your meeting with the trustee.

**Chutron**

Last name and Suffix (Sr., Jr., II, III)

**About Debtor 2 (Spouse Only in a Joint Case):**

First name

Middle name

Last name and Suffix (Sr., Jr., II, III)

**2. All other names you have used in the last 8 years**

**Anna Truchan**

Include your married or maiden names.

**3. Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)**

**xxx-xx-1311**

Debtor 1 Chutron, Anna**About Debtor 1:****4. Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years**Include trade names and *doing business as* names I have not used any business name or EINs.

Business name(s)

EINs

**About Debtor 2 (Spouse Only in a Joint Case):** I have not used any business name or EINs.

Business name(s)

EINs

**5. Where you live****6721 Aspen Ln  
Apt 6  
Westmont, IL 60559-3350**

Number, Street, City, State &amp; ZIP Code

**DuPage**

County

**If your mailing address is different from the one above, fill it in here.** Note that the court will send any notices to you at this mailing address.

Number, P.O. Box, Street, City, State &amp; ZIP Code

**If Debtor 2 lives at a different address:**

Number, Street, City, State &amp; ZIP Code

County

**If Debtor 2's mailing address is different from yours, fill it in here.** Note that the court will send any notices to this mailing address.

Number, P.O. Box, Street, City, State &amp; ZIP Code

**6. Why you are choosing this district to file for bankruptcy****Check one:**

- Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
- I have another reason.  
Explain. (See 28 U.S.C. § 1408.)

**Check one:**

- Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
- I have another reason.  
Explain. (See 28 U.S.C. § 1408.)

**Part 2: Tell the Court About Your Bankruptcy Case**

7. **The chapter of the Bankruptcy Code you are choosing to file under** *Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box.*

Chapter 7  
 Chapter 11  
 Chapter 12  
 Chapter 13

8. **How you will pay the fee**

**I will pay the entire fee when I file my petition.** Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address.  
 **I need to pay the fee in installments.** If you choose this option, sign and attach the *Application for Individuals to Pay The Filing Fee in Installments* (Official Form 103A).  
 **I request that my fee be waived** (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the *Application to Have the Chapter 7 Filing Fee Waived* (Official Form 103B) and file it with your petition.

9. **Have you filed for bankruptcy within the last 8 years?**

No.  
 Yes.

District \_\_\_\_\_ When \_\_\_\_\_ Case number \_\_\_\_\_  
 District \_\_\_\_\_ When \_\_\_\_\_ Case number \_\_\_\_\_  
 District \_\_\_\_\_ When \_\_\_\_\_ Case number \_\_\_\_\_

10. **Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?**

No  
 Yes.

Debtor \_\_\_\_\_ Relationship to you \_\_\_\_\_  
 District \_\_\_\_\_ When \_\_\_\_\_ Case number, if known \_\_\_\_\_  
 Debtor \_\_\_\_\_ Relationship to you \_\_\_\_\_  
 District \_\_\_\_\_ When \_\_\_\_\_ Case number, if known \_\_\_\_\_

11. **Do you rent your residence?**

No. Go to line 12.  
 Yes. Has your landlord obtained an eviction judgment against you and do you want to stay in your residence?  
 No. Go to line 12.  
 Yes. Fill out *Initial Statement About an Eviction Judgment Against You* (Form 101A) and file it with this bankruptcy petition.

Debtor 1 Chutron, Anna**Part 3: Report About Any Businesses You Own as a Sole Proprietor****12. Are you a sole proprietor of any full- or part-time business?** No.

Go to Part 4.

 Yes.

Name and location of business

A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.

If you have more than one sole proprietorship, use a separate sheet and attach it to this petition.

Name of business, if any

Number, Street, City, State &amp; ZIP Code

*Check the appropriate box to describe your business:*

- Health Care Business (as defined in 11 U.S.C. § 101(27A))
- Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))
- Stockbroker (as defined in 11 U.S.C. § 101(53A))
- Commodity Broker (as defined in 11 U.S.C. § 101(6))
- None of the above

**13. Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?**

For a definition of *small business debtor*, see 11 U.S.C. § 101(51D).

If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. 1116(1)(B).

 No.

I am not filing under Chapter 11.

 No.

I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code.

 Yes.

I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code.

**Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention****14. Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety? Or do you own any property that needs immediate attention?**

For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?

 No. Yes.

What is the hazard?

If immediate attention is needed, why is it needed?

Where is the property?

Number, Street, City, State &amp; Zip Code

**Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling****15. Tell the court whether you have received a briefing about credit counseling.**

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

**About Debtor 1:**

You must check one:

**I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.**

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

**I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.**

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

**I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.**

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

 **I am not required to receive a briefing about credit counseling because of:**

**Inc incapacity.**  
I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

**Disability.**  
My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

**Active duty.**  
I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

**About Debtor 2 (Spouse Only in a Joint Case):**

You must check one:

**I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.**

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

**I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.**

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

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**Disability.**  
My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

**Active duty.**  
I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

**Part 6: Answer These Questions for Reporting Purposes**

16. What kind of debts do you have?	16a. <b>Are your debts primarily consumer debts?</b> Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."		
	<input type="checkbox"/> No. Go to line 16b.		
	<input checked="" type="checkbox"/> Yes. Go to line 17.		
16b.	<b>Are your debts primarily business debts?</b> Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment.		
	<input type="checkbox"/> No. Go to line 16c.		
	<input type="checkbox"/> Yes. Go to line 17.		
16c.	State the type of debts you owe that are not consumer debts or business debts		
<hr/>			
17. Are you filing under Chapter 7?	<input type="checkbox"/> No. I am not filing under Chapter 7. Go to line 18.		
<b>Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors?</b>	<input checked="" type="checkbox"/> Yes. I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available to distribute to unsecured creditors?		
	<input checked="" type="checkbox"/> No		
	<input type="checkbox"/> Yes		
<hr/>			
18. How many Creditors do you estimate that you owe?	<input checked="" type="checkbox"/> 1-49	<input type="checkbox"/> 1,000-5,000	<input type="checkbox"/> 25,001-50,000
	<input type="checkbox"/> 50-99	<input type="checkbox"/> 5001-10,000	<input type="checkbox"/> 50,001-100,000
	<input type="checkbox"/> 100-199	<input type="checkbox"/> 10,001-25,000	<input type="checkbox"/> More than 100,000
	<input type="checkbox"/> 200-999		
<hr/>			
19. How much do you estimate your assets to be worth?	<input checked="" type="checkbox"/> \$0 - \$50,000	<input type="checkbox"/> \$1,000,001 - \$10 million	<input type="checkbox"/> \$500,000,001 - \$1 billion
	<input type="checkbox"/> \$50,001 - \$100,000	<input type="checkbox"/> \$10,000,001 - \$50 million	<input type="checkbox"/> \$1,000,000,001 - \$10 billion
	<input type="checkbox"/> \$100,001 - \$500,000	<input type="checkbox"/> \$50,000,001 - \$100 million	<input type="checkbox"/> \$10,000,000,001 - \$50 billion
	<input type="checkbox"/> \$500,001 - \$1 million	<input type="checkbox"/> \$100,000,001 - \$500 million	<input type="checkbox"/> More than \$50 billion
<hr/>			
20. How much do you estimate your liabilities to be?	<input type="checkbox"/> \$0 - \$50,000	<input type="checkbox"/> \$1,000,001 - \$10 million	<input type="checkbox"/> \$500,000,001 - \$1 billion
	<input checked="" type="checkbox"/> \$50,001 - \$100,000	<input type="checkbox"/> \$10,000,001 - \$50 million	<input type="checkbox"/> \$1,000,000,001 - \$10 billion
	<input type="checkbox"/> \$100,001 - \$500,000	<input type="checkbox"/> \$50,000,001 - \$100 million	<input type="checkbox"/> \$10,000,000,001 - \$50 billion
	<input type="checkbox"/> \$500,001 - \$1 million	<input type="checkbox"/> \$100,000,001 - \$500 million	<input type="checkbox"/> More than \$50 billion

**Part 7: Sign Below**

For you I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct.

If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11, 12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7.

If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).

I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.

I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

**/s/ Anna Chutron**

**Anna Chutron**  
Signature of Debtor 1

Signature of Debtor 2

Executed on May 22, 2017  
MM / DD / YYYY

Executed on \_\_\_\_\_  
MM / DD / YYYY

Debtor 1 Chutron, Anna**For your attorney, if you are represented by one**

I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

**/s/ Mark Sciblo**

Signature of Attorney for Debtor

Date

May 22, 2017

MM / DD / YYYY

**Mark Sciblo**

Printed name

**Law Offices of Mark Sciblo, P.C.**

Firm name

**5945 N Elston Ave  
Chicago, IL 60646-5504**

Number, Street, City, State &amp; ZIP Code

Contact phone

Email address

[attorney@sciblolawoffice.com](mailto:attorney@sciblolawoffice.com)

Bar number &amp; State

Fill in this information to identify your case and this filing:

Debtor 1	<b>Anna Chutron</b>		
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: <u>NORTHERN DISTRICT OF ILLINOIS, EASTERN DIVISION</u>			
Case number			<input type="checkbox"/> Check if this is an amended filing

## Official Form 106A/B

### Schedule A/B: Property

12/15

In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

#### Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In

##### 1. Do you own or have any legal or equitable interest in any residence, building, land, or similar property?

No. Go to Part 2.  
 Yes. Where is the property?

#### Part 2: Describe Your Vehicles

**Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not?** Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: *Executory Contracts and Unexpired Leases*.

##### 3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles

No  
 Yes

3.1 Make: Nissan  
 Model: Rogue  
 Year: 2011  
 Approximate mileage: 150000  
 Other information:  


##### Who has an interest in the property? Check one

Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another  
 Check if this is community property  
(see instructions)

Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: *Creditors Who Have Claims Secured by Property*.

**Current value of the entire property?      Current value of the portion you own?**

\$2,000.00      \$2,000.00

##### 4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories

Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories

No  
 Yes

##### 5 Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for pages you have attached for Part 2. Write that number here.....=>

  
\$2,000.00

#### Part 3: Describe Your Personal and Household Items

##### Do you own or have any legal or equitable interest in any of the following items?

**Current value of the portion you own?**  
 Do not deduct secured claims or exemptions.

##### 6. Household goods and furnishings

Examples: Major appliances, furniture, linens, china, kitchenware  
 No

Debtor 1

Chutron, Anna

 Yes. Describe.....**household goods****\$1,000.00****7. Electronics***Examples:* Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games No Yes. Describe.....**8. Collectibles of value***Examples:* Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles No Yes. Describe.....**9. Equipment for sports and hobbies***Examples:* Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments No Yes. Describe.....**10. Firearms***Examples:* Pistols, rifles, shotguns, ammunition, and related equipment No Yes. Describe.....**11. Clothes***Examples:* Everyday clothes, furs, leather coats, designer wear, shoes, accessories No Yes. Describe.....**clothes****\$300.00****12. Jewelry***Examples:* Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver No Yes. Describe.....**13. Non-farm animals***Examples:* Dogs, cats, birds, horses No Yes. Describe.....**14. Any other personal and household items you did not already list, including any health aids you did not list** No Yes. Give specific information.....**15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached for Part 3. Write that number here .....****\$1,300.00****Part 4: Describe Your Financial Assets**

Do you own or have any legal or equitable interest in any of the following?

Current value of the portion you own?  
Do not deduct secured claims or exemptions.**16. Cash***Examples:* Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition No Yes.....

Debtor 1 Chutron, Anna**17. Deposits of money**

*Examples:* Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each.

 No Yes.....

Institution name:

17.1. **Checking Account** TCF Bank\$200.00**18. Bonds, mutual funds, or publicly traded stocks**

*Examples:* Bond funds, investment accounts with brokerage firms, money market accounts

 No Yes.....

Institution or issuer name:

**19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture** No Yes. Give specific information about them.....

Name of entity:

% of ownership:

**20. Government and corporate bonds and other negotiable and non-negotiable instruments**

*Negotiable instruments* include personal checks, cashiers' checks, promissory notes, and money orders.

*Non-negotiable instruments* are those you cannot transfer to someone by signing or delivering them.

 No Yes. Give specific information about them

Issuer name:

**21. Retirement or pension accounts**

*Examples:* Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans

 No Yes. List each account separately.

Type of account:

Institution name:

**22. Security deposits and prepayments**

Your share of all unused deposits you have made so that you may continue service or use from a company

*Examples:* Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others

 No Yes. ....

Institution name or individual:

**23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years)** No Yes.....

Issuer name and description.

**24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program.**

26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1).

 No Yes.....

Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c):

**25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit** No Yes. Give specific information about them...**26. Patents, copyrights, trademarks, trade secrets, and other intellectual property**

*Examples:* Internet domain names, websites, proceeds from royalties and licensing agreements

 No Yes. Give specific information about them...**27. Licenses, franchises, and other general intangibles**

*Examples:* Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses

 No Yes. Give specific information about them...

**Money or property owed to you?**

**Current value of the portion you own?**  
Do not deduct secured claims or exemptions.

**28. Tax refunds owed to you** No Yes. Give specific information about them, including whether you already filed the returns and the tax years.....**29. Family support***Examples:* Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement No Yes. Give specific information.....**30. Other amounts someone owes you***Examples:* Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else No Yes. Give specific information..**31. Interests in insurance policies***Examples:* Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance No Yes. Name the insurance company of each policy and list its value.

Company name:

Beneficiary:

Surrender or refund value:

**32. Any interest in property that is due you from someone who has died**

If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died.

 No Yes. Give specific information..**33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment***Examples:* Accidents, employment disputes, insurance claims, or rights to sue No Yes. Describe each claim.....**34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims** No Yes. Describe each claim.....**35. Any financial assets you did not already list** No Yes. Give specific information..**36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached for Part 4. Write that number here.....**

\$200.00

**Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1.****37. Do you own or have any legal or equitable interest in any business-related property?** No. Go to Part 6. Yes. Go to line 38.**Part 6: Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In.**

If you own or have an interest in farmland, list it in Part 1.

**46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?** No. Go to Part 7.

Official Form 106A/B

Schedule A/B: Property

Yes. Go to line 47.**Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above****53. Do you have other property of any kind you did not already list?**

Examples: Season tickets, country club membership

 No Yes. Give specific information.....**54. Add the dollar value of all of your entries from Part 7. Write that number here .....**

\$0.00

**Part 8: List the Totals of Each Part of this Form**

55. Part 1: Total real estate, line 2 .....	\$0.00
56. Part 2: Total vehicles, line 5	\$2,000.00
57. Part 3: Total personal and household items, line 15	\$1,300.00
58. Part 4: Total financial assets, line 36	\$200.00
59. Part 5: Total business-related property, line 45	\$0.00
60. Part 6: Total farm- and fishing-related property, line 52	\$0.00
61. Part 7: Total other property not listed, line 54	\$0.00
	+
62. Total personal property. Add lines 56 through 61...	<b>\$3,500.00</b>
	Copy personal property total
63. Total of all property on Schedule A/B. Add line 55 + line 62	<b>\$3,500.00</b>

Fill in this information to identify your case:

Debtor 1	<b>Anna Chutron</b>		
	First Name	Middle Name	Last Name
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:		NORTHERN DISTRICT OF ILLINOIS, EASTERN DIVISION	
Case number (if known)			

Check if this is an amended filing

## Official Form 106C

### Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

#### Part 1: Identify the Property You Claim as Exempt

1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.

You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)  
 You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)

2. For any property you list on *Schedule A/B* that you claim as exempt, fill in the information below.

Brief description of the property and line on <i>Schedule A/B</i> that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
	Copy the value from <i>Schedule A/B</i>	Check only one box for each exemption.	
<b>Nissan Rogue 2011 150000</b> Line from <i>Schedule A/B</i> 3.1	<b>\$2,000.00</b>	<input checked="" type="checkbox"/> <b>\$2,000.00</b> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<b>735 ILCS 5/12-1001(b)</b>
<b>household goods</b> Line from <i>Schedule A/B</i> 6.1	<b>\$1,000.00</b>	<input checked="" type="checkbox"/> <b>\$1,000.00</b> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<b>735 ILCS 5/12-1001(b)</b>
<b>clothes</b> Line from <i>Schedule A/B</i> 11.1	<b>\$300.00</b>	<input checked="" type="checkbox"/> <b>\$300.00</b> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<b>735 ILCS 5/12-1001(b)</b>
<b>TCF Bank</b> Line from <i>Schedule A/B</i> 17.1	<b>\$200.00</b>	<input checked="" type="checkbox"/> <b>\$200.00</b> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<b>735 ILCS 5/12-1001(b)</b>

3. **Are you claiming a homestead exemption of more than \$160,375?**

(Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.)

No

Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?

No

Yes

Fill in this information to identify your case:

Debtor 1	<b>Anna Chutron</b>		
	First Name	Middle Name	Last Name
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	NORTHERN DISTRICT OF ILLINOIS, EASTERN DIVISION		
Case number (if known)			

Check if this is an amended filing

## Official Form 106D

### Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

1. Do any creditors have claims secured by your property?

No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.  
 Yes. Fill in all of the information below.

Fill in this information to identify your case:

Debtor 1	<b>Anna Chutron</b>		
	First Name	Middle Name	Last Name
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:		NORTHERN DISTRICT OF ILLINOIS, EASTERN DIVISION	
Case number (if known) _____			

Check if this is an amended filing

## Official Form 106E/F

### Schedule E/F: Creditors Who Have Unsecured Claims

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Have Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. If you have no information to report in a Part, do not file that Part. On the top of any additional pages, write your name and case number (if known).

#### Part 1: List All of Your PRIORITY Unsecured Claims

1. Do any creditors have priority unsecured claims against you?

No. Go to Part 2.  
 Yes.

#### Part 2: List All of Your NONPRIORITY Unsecured Claims

3. Do any creditors have nonpriority unsecured claims against you?

No. You have nothing to report in this part. Submit this form to the court with your other schedules.  
 Yes.

4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2.

		Total claim
4.1	<b>Advocate Medical Group</b> Nonpriority Creditor's Name	Last 4 digits of account number <u>3120</u> <span style="float: right;"><u>\$4,339.00</u></span>
		When was the debt incurred? _____
		<b>As of the date you file, the claim is:</b> Check all that apply
	<input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt <input type="checkbox"/> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify _____

Debtor 1 Chutron, Anna

<b>4.2</b>	<b>Amex</b> Nonpriority Creditor's Name <b>Correspondence</b> <b>PO Box 981540</b> <b>El Paso, TX 79998-1540</b> Number Street City State Zip Code	Last 4 digits of account number <u>5133</u> When was the debt incurred? <u>2003-07</u>  <b>As of the date you file, the claim is:</b> Check all that apply <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Contingent <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Unliquidated <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> Disputed <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> <b>Check if this claim is for a community debt</b> <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Other. Specify _____ <input type="checkbox"/> Yes	<b>\$1,294.00</b>
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<b>4.3</b>	<b>Anesthesiologists LTD</b> Nonpriority Creditor's Name <b>PO Box 3871</b> <b>Carol Stream, IL 60132-3871</b> Number Street City State Zip Code	Last 4 digits of account number <u>3863</u> When was the debt incurred?  <b>As of the date you file, the claim is:</b> Check all that apply <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Contingent <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Unliquidated <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> Disputed <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> <b>Check if this claim is for a community debt</b> <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Other. Specify _____ <input type="checkbox"/> Yes	<b>\$2,340.00</b>
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<b>4.4</b>	<b>At T Midwest</b> Nonpriority Creditor's Name <b>c/o IC System Inc.</b> <b>444 Highway 96 E</b> <b>Saint Paul, MN 55127-2557</b> Number Street City State Zip Code	Last 4 digits of account number <u>6636</u> When was the debt incurred? <u>2017-03</u>  <b>As of the date you file, the claim is:</b> Check all that apply <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Contingent <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Unliquidated <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> Disputed <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> <b>Check if this claim is for a community debt</b> <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Other. Specify _____ <input type="checkbox"/> Yes	<b>\$183.00</b>
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Case number (if known)

<b>4.5</b>	<b>Bank of America</b> Nonpriority Creditor's Name <b>NC4-105-03-14</b> <b>PO Box 26012</b> <b>Greensboro, NC 27420-6012</b> Number Street City State Zip Code	Last 4 digits of account number <b>7486</b> When was the debt incurred? <b>2008-06</b>	<b>\$1,576.00</b>
<b>Who incurred the debt?</b> Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Contingent <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Unliquidated <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> Disputed <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> <b>Check if this claim is for a community debt</b> <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Other. Specify _____ <input type="checkbox"/> Yes			
<b>As of the date you file, the claim is:</b> Check all that apply <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify _____			
<b>4.6</b>	<b>BMO Harris</b> Nonpriority Creditor's Name <b>Attn: Bankruptcy</b> <b>770 N Water St</b> <b>Milwaukee, WI 53202-0002</b> Number Street City State Zip Code	Last 4 digits of account number <b>7128</b> When was the debt incurred? <b>2007-09</b>	<b>\$31,658.00</b>
<b>Who incurred the debt?</b> Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Contingent <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Unliquidated <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> Disputed <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> <b>Check if this claim is for a community debt</b> <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Other. Specify _____ <input type="checkbox"/> Yes			
<b>As of the date you file, the claim is:</b> Check all that apply <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify _____			
<b>4.7</b>	<b>Capital One</b> Nonpriority Creditor's Name <b>Attn: Bankruptcy</b> <b>PO Box 30253</b> <b>Salt Lake City, UT 84130-0253</b> Number Street City State Zip Code	Last 4 digits of account number <b>8753</b> When was the debt incurred? <b>2005-10-29</b>	<b>\$2,375.00</b>
<b>Who incurred the debt?</b> Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Contingent <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Unliquidated <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> Disputed <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> <b>Check if this claim is for a community debt</b> <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Other. Specify _____ <input type="checkbox"/> Yes			
<b>As of the date you file, the claim is:</b> Check all that apply <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify _____			



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Case number (if known)

<b>4.11</b>	<b>Citibank</b> Nonpriority Creditor's Name <hr/> <b>PO Box 6500</b> <b>Sioux Falls, SD 57117-6500</b> Number Street City State Zip Code	Last 4 digits of account number <u>2770</u> When was the debt incurred? <u>2015-03</u> <hr/> <b>As of the date you file, the claim is:</b> Check all that apply <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Contingent <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Unliquidated <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> Disputed <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Other. Specify _____ <input type="checkbox"/> Yes	<b>\$2,703.00</b>
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<b>4.12</b>	<b>Comcast Central Warehouse</b> Nonpriority Creditor's Name <hr/> <b>c/o Credit management LP</b> <b>PO Box 118288</b> <b>Carrollton, TX 75011-8288</b> Number Street City State Zip Code	Last 4 digits of account number <u>6309</u> When was the debt incurred? <u>2017-02</u> <hr/> <b>As of the date you file, the claim is:</b> Check all that apply <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Contingent <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Unliquidated <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> Disputed <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Other. Specify _____ <input type="checkbox"/> Yes	<b>\$109.00</b>
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<b>4.13</b>	<b>Du Page Emergency Physicians</b> Nonpriority Creditor's Name <hr/> <b>PO Box 366</b> <b>Hinsdale, IL 60522-0366</b> Number Street City State Zip Code	Last 4 digits of account number <u>4022</u> When was the debt incurred? _____ <hr/> <b>As of the date you file, the claim is:</b> Check all that apply <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Contingent <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Unliquidated <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> Disputed <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Other. Specify _____ <input type="checkbox"/> Yes	<b>\$1,007.00</b>
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Case number (if known)

4.14	<b>Edward Hospital</b> Nonpriority Creditor's Name <b>c/o Merchants Credit Guide</b> <b>223 W Jackson Blvd Ste 700</b> <b>Chicago, IL 60606-6914</b> Number Street City State Zip Code	Last 4 digits of account number <u>1859</u>	\$1,795.00
		When was the debt incurred? <u>2012-12</u>	
	As of the date you file, the claim is: Check all that apply		
	<input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Contingent <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Unliquidated <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> Disputed <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt 		
	<b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify _____		
	<b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
4.15	<b>Fia Card Services N.A.</b> Nonpriority Creditor's Name <b>c/o Midland Funding LLC</b> <b>Attn.:Bankruptcy</b> <b>PO Box 939069</b> <b>San Diego, CA 92193-9069</b> Number Street City State Zip Code	Last 4 digits of account number <u>0884</u>	\$3,386.00
		When was the debt incurred? <u>2013-08</u>	
	As of the date you file, the claim is: Check all that apply		
	<input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Contingent <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Unliquidated <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> Disputed <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt 		
	<b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify _____		
	<b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
4.16	<b>IICRDP-Integrated Imaging Consultans</b> Nonpriority Creditor's Name <b>44000 Garfield Rd</b> <b>Clinton Township, MI 48038-1125</b> Number Street City State Zip Code	Last 4 digits of account number <u>5470</u>	\$111.00
		When was the debt incurred? _____	
	As of the date you file, the claim is: Check all that apply		
	<input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Contingent <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Unliquidated <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> Disputed <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt 		
	<b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify _____		
	<b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor 1 Chutron, Anna

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Case number (if known)

4.17

**Jozef Krzyciak**

Nonpriority Creditor's Name

**c/o Keis George LLC****1 N La Salle St # 2046****Chicago, IL 60602-3926**

Number Street City State Zip Code

Who incurred the debt? Check one.

Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another  
 Check if this claim is for a community debt

Is the claim subject to offset?

No  
 Yes

Last 4 digits of account number

3751\$1,390.00

When was the debt incurred?

As of the date you file, the claim is: Check all that apply

Contingent  
 Unliquidated  
 Disputed

## Type of NONPRIORITY unsecured claim:

Student loans  
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
 Debts to pension or profit-sharing plans, and other similar debts  
 Other. Specify \_\_\_\_\_

4.18

**Midland Funding**

Nonpriority Creditor's Name

**c/o Kevin Mortel & Toni Miller,  
Attys****1821 Walden Office Sq Ste 400  
Schaumburg, IL 60173-4273**

Number Street City State Zip Code

Who incurred the debt? Check one.

Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another  
 Check if this claim is for a community debt

Is the claim subject to offset?

No  
 Yes

Last 4 digits of account number

C870\$3,386.00

When was the debt incurred?

As of the date you file, the claim is: Check all that apply

Contingent  
 Unliquidated  
 Disputed

## Type of NONPRIORITY unsecured claim:

Student loans  
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
 Debts to pension or profit-sharing plans, and other similar debts  
 Other. Specify \_\_\_\_\_

4.19

**Midland Funding**

Nonpriority Creditor's Name

**c/o Blitt & Gaines****661 Glenn Ave****Wheeler, IL 60090-6017**

Number Street City State Zip Code

Who incurred the debt? Check one.

Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another  
 Check if this claim is for a community debt

Is the claim subject to offset?

No  
 Yes

Last 4 digits of account number

0964\$2,702.00

When was the debt incurred?

As of the date you file, the claim is: Check all that apply

Contingent  
 Unliquidated  
 Disputed

## Type of NONPRIORITY unsecured claim:

Student loans  
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
 Debts to pension or profit-sharing plans, and other similar debts  
 Other. Specify \_\_\_\_\_

Debtor 1 Chutron, Anna

<p>4.20</p> <p><b>Midwest Diagnostic Pathology, SC</b> Nonpriority Creditor's Name</p> <p><b>PO Box 578</b> <b>Park Ridge, IL 60068-0578</b> Number Street City State Zip Code</p> <p><b>Who incurred the debt?</b> Check one.</p> <p><input checked="" type="checkbox"/> Debtor 1 only</p> <p><input type="checkbox"/> Debtor 2 only</p> <p><input type="checkbox"/> Debtor 1 and Debtor 2 only</p> <p><input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> <b>Check if this claim is for a community debt</b></p> <p><b>Is the claim subject to offset?</b></p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>	<p>Last 4 digits of account number <u>5160</u> <span style="float: right;">\$201.00</span></p> <p>When was the debt incurred? _____</p> <p><b>As of the date you file, the claim is:</b> Check all that apply</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p><b>Type of NONPRIORITY unsecured claim:</b></p> <p><input type="checkbox"/> Student loans</p> <p><input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims</p> <p><input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts</p> <p><input checked="" type="checkbox"/> Other. Specify _____</p>
<p>4.21</p> <p><b>Nissan Motor Acceptance Corp</b> Nonpriority Creditor's Name</p> <p><b>c/o Collins Asset Group</b> <b>5725 W Highway 290 Ste 1</b> <b>Austin, TX 78735-8720</b> Number Street City State Zip Code</p> <p><b>Who incurred the debt?</b> Check one.</p> <p><input checked="" type="checkbox"/> Debtor 1 only</p> <p><input type="checkbox"/> Debtor 2 only</p> <p><input type="checkbox"/> Debtor 1 and Debtor 2 only</p> <p><input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> <b>Check if this claim is for a community debt</b></p> <p><b>Is the claim subject to offset?</b></p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>	
<p>Last 4 digits of account number <u>0001</u> <span style="float: right;">\$3,190.00</span></p> <p>When was the debt incurred? <u>2014-05</u></p> <p><b>As of the date you file, the claim is:</b> Check all that apply</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p><b>Type of NONPRIORITY unsecured claim:</b></p> <p><input type="checkbox"/> Student loans</p> <p><input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims</p> <p><input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts</p> <p><input checked="" type="checkbox"/> Other. Specify _____</p>	
<p>4.22</p> <p><b>Northwestern Medicine</b> Nonpriority Creditor's Name</p> <p><b>c/o Nationwide Credit &amp; Collection, Inc.</b> <b>815 Commerce Dr Ste 270</b> <b>Oak Brook, IL 60523-8852</b> Number Street City State Zip Code</p> <p><b>Who incurred the debt?</b> Check one.</p> <p><input checked="" type="checkbox"/> Debtor 1 only</p> <p><input type="checkbox"/> Debtor 2 only</p> <p><input type="checkbox"/> Debtor 1 and Debtor 2 only</p> <p><input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> <b>Check if this claim is for a community debt</b></p> <p><b>Is the claim subject to offset?</b></p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>	
<p>Last 4 digits of account number <u>8516</u> <span style="float: right;">\$366.00</span></p> <p>When was the debt incurred? _____</p> <p><b>As of the date you file, the claim is:</b> Check all that apply</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p><b>Type of NONPRIORITY unsecured claim:</b></p> <p><input type="checkbox"/> Student loans</p> <p><input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims</p> <p><input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts</p> <p><input checked="" type="checkbox"/> Other. Specify _____</p>	

Debtor 1 Chutron, Anna

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Case number (if known)

4.23	<b>River Shore Condo Association</b> Nonpriority Creditor's Name <b>c/o Vanguard Property Management</b> <b>50 Commerce Dr Ste 110</b> <b>Schaumburg, IL 60173-5308</b>	Last 4 digits of account number <b>4602</b>	<b>\$3,490.00</b>
When was the debt incurred? _____			
As of the date you file, the claim is: Check all that apply			
<input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Contingent <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Unliquidated <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> Disputed <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Check if this claim is for a community debt <input type="checkbox"/> Student loans <input type="checkbox"/> Is the claim subject to offset? <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input checked="" type="checkbox"/> No <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input type="checkbox"/> Yes <input checked="" type="checkbox"/> Other. Specify <b>Judgement</b>			
4.24 <b>Village of Westmont</b> Nonpriority Creditor's Name		Last 4 digits of account number <b>974P</b>	<b>\$525.00</b>
When was the debt incurred? _____			
As of the date you file, the claim is: Check all that apply			
<input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Contingent <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Unliquidated <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> Disputed <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Check if this claim is for a community debt <input type="checkbox"/> Student loans <input type="checkbox"/> Is the claim subject to offset? <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input checked="" type="checkbox"/> No <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input type="checkbox"/> Yes <input checked="" type="checkbox"/> Other. Specify			
4.25 <b>Westmont Public Library</b> Nonpriority Creditor's Name		Last 4 digits of account number <b>8527</b>	<b>\$83.00</b>
When was the debt incurred? _____			
As of the date you file, the claim is: Check all that apply			
<input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Contingent <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Unliquidated <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> Disputed <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Check if this claim is for a community debt <input type="checkbox"/> Student loans <input type="checkbox"/> Is the claim subject to offset? <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input checked="" type="checkbox"/> No <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input type="checkbox"/> Yes <input checked="" type="checkbox"/> Other. Specify			

**Part 3: List Others to Be Notified About a Debt That You Already Listed**

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Debtor 1 Chutron, Anna

Name and Address

**Amex**  
**PO Box 297871**  
**Fort Lauderdale, FL 33329-7871**

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.2 of (Check one):

Part 1: Creditors with Priority Unsecured Claims  
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

**5133**

Name and Address

**Bk of Amer**  
**4909 Savarese Cir**  
**Tampa, FL 33634-2413**

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.5 of (Check one):

Part 1: Creditors with Priority Unsecured Claims  
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

**7486**

Name and Address

**Bmo Harris Bank NA**  
**PO Box 94934**  
**Palatine, IL 60069**

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.6 of (Check one):

Part 1: Creditors with Priority Unsecured Claims  
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

**7128**

Name and Address

**Capital One**  
**15000 Capital One Dr**  
**Richmond, VA 23238-1119**

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.7 of (Check one):

Part 1: Creditors with Priority Unsecured Claims  
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

**8753**

Name and Address

**Collins Asset Group**  
**5725 W Highway 290 Ste 1**  
**Austin, TX 78735-8720**

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.21 of (Check one):

Part 1: Creditors with Priority Unsecured Claims  
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

**0001**

Name and Address

**Credit Management Lp**  
**4200 International Pkwy**  
**Carrollton, TX 75007-1912**

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.12 of (Check one):

Part 1: Creditors with Priority Unsecured Claims  
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

**6309**

Name and Address

**Emilia Zivojin**  
**437 N Wesley Dr**  
**Addison, IL 60101-2131**

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.18 of (Check one):

Part 1: Creditors with Priority Unsecured Claims  
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

**C870**

Name and Address

**I C System Inc**  
**PO Box 64378**  
**Saint Paul, MN 55164-0378**

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.4 of (Check one):

Part 1: Creditors with Priority Unsecured Claims  
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

**6636**

Name and Address

**ICS Inc**  
**PO Box 1010**  
**Tinley Park, IL 60477-9110**

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.24 of (Check one):

Part 1: Creditors with Priority Unsecured Claims  
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

**974P**

Name and Address

**Merchants Credit Guide**  
**223 W Jackson Blvd Ste 4**  
**Chicago, IL 60606-6908**

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.14 of (Check one):

Part 1: Creditors with Priority Unsecured Claims  
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

**1859**

Name and Address

**Midland Funding**  
**2365 Northside Dr Ste 30**  
**San Diego, CA 92108-2709**

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.15 of (Check one):

Part 1: Creditors with Priority Unsecured Claims  
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

**0884**

Name and Address

On which entry in Part 1 or Part 2 did you list the original creditor?

Debtor 1 Chutron, Anna

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Case number (if known)

**Midland Funding**  
2365 Northside Dr Ste 30  
San Diego, CA 92108-2709Line 4.11 of (Check one):

Part 1: Creditors with Priority Unsecured Claims  
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

**2770**

Name and Address

**Portfolio Recovery Ass**  
120 Corporate Blvd Ste 1  
Norfolk, VA 23502-4952

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.8 of (Check one):

Part 1: Creditors with Priority Unsecured Claims  
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

**7897**

Name and Address

**Unique National Collections**  
119 E Maple St  
Jeffersonville, IN 47130-3439

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.25 of (Check one):

Part 1: Creditors with Priority Unsecured Claims  
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

**8527**

Name and Address

**Unknown Plaintiff**

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.18 of (Check one):

Part 1: Creditors with Priority Unsecured Claims  
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

**C870**

Name and Address

**Unknown Plaintiff**

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.17 of (Check one):

Part 1: Creditors with Priority Unsecured Claims  
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

**3751**

Name and Address

**Unknown Plaintiff**

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.9 of (Check one):

Part 1: Creditors with Priority Unsecured Claims  
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

**5141**

Name and Address

**Unknown Plaintiff**

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.23 of (Check one):

Part 1: Creditors with Priority Unsecured Claims  
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

**4602****Part 4: Add the Amounts for Each Type of Unsecured Claim**

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

		Total Claim
Total claims from Part 1	6a. Domestic support obligations	6a. \$ <b>0.00</b>
	6b. Taxes and certain other debts you owe the government	6b. \$ <b>0.00</b>
	6c. Claims for death or personal injury while you were intoxicated	6c. \$ <b>0.00</b>
	6d. Other. Add all other priority unsecured claims. Write that amount here.	6d. \$ <b>0.00</b>
	6e. Total Priority. Add lines 6a through 6d.	6e. \$ <b>0.00</b>
Total claims from Part 2	6f. Student loans	6f. \$ <b>0.00</b>
	6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g. \$ <b>0.00</b>
	6h. Debts to pension or profit-sharing plans, and other similar debts	6h. \$ <b>0.00</b>
	6i. Other. Add all other nonpriority unsecured claims. Write that amount here.	6i. \$ <b>72,620.00</b>
	6j. Total Nonpriority. Add lines 6f through 6i.	6j. \$ <b>72,620.00</b>

Fill in this information to identify your case:

Debtor 1	<b>Anna Chutron</b>		
	First Name	Middle Name	Last Name
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	NORTHERN DISTRICT OF ILLINOIS, EASTERN DIVISION		
Case number (if known)			

Check if this is an amended filing

## Official Form 106G

### Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

1. Do you have any executory contracts or unexpired leases?

No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.  
 Yes. Fill in all of the information below even if the contacts of leases are listed on *Schedule A/B:Property*(Official Form 106 A/B).

2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or company with whom you have the contract or lease		State what the contract or lease is for
	Name, Number, Street, City, State and ZIP Code		
2.1	 Name  Number Street  City State ZIP Code		
2.2	 Name  Number Street  City State ZIP Code		
2.3	 Name  Number Street  City State ZIP Code		
2.4	 Name  Number Street  City State ZIP Code		
2.5	 Name  Number Street  City State ZIP Code		

Fill in this information to identify your case:

Debtor 1	<b>Anna Chutron</b>		
	First Name	Middle Name	Last Name
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	NORTHERN DISTRICT OF ILLINOIS, EASTERN DIVISION		
Case number (if known)			

Check if this is an amended filing

## Official Form 106H Schedule H: Your Codebtors

12/15

Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question.

1. Do you have any codebtors? (If you are filing a joint case, do not list either spouse as a codebtor.)

No  
 Yes

2. Within the last 8 years, have you lived in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.)

No. Go to line 3.  
 Yes. Did your spouse, former spouse, or legal equivalent live with you at the time?

3. In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filing with you. List the person shown in line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule G (Official Form 106G). Use Schedule D, Schedule E/F, or Schedule G to fill out Column 2.

**Column 1: Your codebtor**

Name, Number, Street, City, State and ZIP Code

**Column 2: The creditor to whom you owe the debt**

Check all schedules that apply:

**3.1**

Name

Schedule D, line

\_\_\_\_\_

Schedule E/F, line

\_\_\_\_\_

Schedule G, line

\_\_\_\_\_

Number Street  
City State ZIP Code

**3.2**

Name

Schedule D, line

\_\_\_\_\_

Schedule E/F, line

\_\_\_\_\_

Schedule G, line

\_\_\_\_\_

Number Street  
City State ZIP Code

Fill in this information to identify your case:

Debtor 1	<u>Anna Chutron</u>
Debtor 2 (Spouse, if filing)	_____
United States Bankruptcy Court for the:	<u>NORTHERN DISTRICT OF ILLINOIS, EASTERN DIVISION</u>
Case number (if known)	_____

Check if this is:

An amended filing  
 A supplement showing postpetition chapter 13 income as of the following date:

MM / DD / YYYY

## Official Form 106I

### Schedule I: Your Income

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

#### Part 1: Describe Employment

1. Fill in your employment information.

If you have more than one job, attach a separate page with information about additional employers.

#### Employment status

	Debtor 1	Debtor 2 or non-filing spouse
<input checked="" type="checkbox"/> Employed	<input type="checkbox"/> Employed	
<input type="checkbox"/> Not employed	<input type="checkbox"/> Not employed	
Occupation Include part-time, seasonal, or self-employed work.	_____	_____
Employer's name Occupation may include student or homemaker, if it applies.	<u>Emilia's Cleaning</u>	_____
Employer's address 7125 W Gunnison St Ste 223 Norridge, IL 60706-3830	_____	_____
How long employed there?	<u>2 years</u>	_____

#### Part 2: Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

	For Debtor 1	For Debtor 2 or non-filing spouse
2. List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.	2. \$ <u>2,081.20</u>	\$ <u>N/A</u>
3. Estimate and list monthly overtime pay.	3. +\$ <u>0.00</u>	+\$ <u>N/A</u>
4. Calculate gross Income. Add line 2 + line 3.	4. \$ <u>2,081.20</u>	\$ <u>N/A</u>

Debtor 1 Chutron, Anna

Case number (if known)

	For Debtor 1	For Debtor 2 or non-filing spouse
<b>Copy line 4 here</b>	<b>4. \$ 2,081.20</b>	<b>\$ N/A</b>
<b>5. List all payroll deductions:</b>		
5a. <b>Tax, Medicare, and Social Security deductions</b>	5a. \$ <b>0.00</b>	\$ <b>N/A</b>
5b. <b>Mandatory contributions for retirement plans</b>	5b. \$ <b>0.00</b>	\$ <b>N/A</b>
5c. <b>Voluntary contributions for retirement plans</b>	5c. \$ <b>0.00</b>	\$ <b>N/A</b>
5d. <b>Required repayments of retirement fund loans</b>	5d. \$ <b>0.00</b>	\$ <b>N/A</b>
5e. <b>Insurance</b>	5e. \$ <b>0.00</b>	\$ <b>N/A</b>
5f. <b>Domestic support obligations</b>	5f. \$ <b>0.00</b>	\$ <b>N/A</b>
5g. <b>Union dues</b>	5g. \$ <b>0.00</b>	\$ <b>N/A</b>
5h. <b>Other deductions.</b> Specify: _____	5h. + \$ <b>0.00</b>	+ \$ <b>N/A</b>
<b>6. Add the payroll deductions.</b> Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	<b>6. \$ 0.00</b>	\$ <b>N/A</b>
<b>7. Calculate total monthly take-home pay.</b> Subtract line 6 from line 4.	<b>7. \$ 2,081.20</b>	\$ <b>N/A</b>
<b>8. List all other income regularly received:</b>		
8a. <b>Net income from rental property and from operating a business, profession, or farm</b> Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a. \$ <b>0.00</b>	\$ <b>N/A</b>
8b. <b>Interest and dividends</b>	8b. \$ <b>0.00</b>	\$ <b>N/A</b>
8c. <b>Family support payments that you, a non-filing spouse, or a dependent regularly receive</b> Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c. \$ <b>0.00</b>	\$ <b>N/A</b>
8d. <b>Unemployment compensation</b>	8d. \$ <b>0.00</b>	\$ <b>N/A</b>
8e. <b>Social Security</b>	8e. \$ <b>0.00</b>	\$ <b>N/A</b>
8f. <b>Other government assistance that you regularly receive</b> Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: _____	8f. \$ <b>0.00</b>	\$ <b>N/A</b>
8g. <b>Pension or retirement income</b>	8g. \$ <b>0.00</b>	\$ <b>N/A</b>
8h. <b>Other monthly income.</b> Specify: _____	8h. + \$ <b>0.00</b>	+ \$ <b>N/A</b>
<b>9. Add all other income.</b> Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	<b>9. \$ 0.00</b>	\$ <b>N/A</b>
<b>10. Calculate monthly income.</b> Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	<b>10. \$ 2,081.20</b>	+ \$ <b>N/A</b> = \$ <b>2,081.20</b>
<b>11. State all other regular contributions to the expenses that you list in Schedule J.</b> Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: _____	11. +\$ <b>0.00</b>	
<b>12. Add the amount in the last column of line 10 to the amount in line 11.</b> The result is the combined monthly income. Write that amount on the <i>Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data</i> , if it applies	12. \$ <b>2,081.20</b>	
<b>13. Do you expect an increase or decrease within the year after you file this form?</b>	<b>Combined monthly income</b>	
<input checked="" type="checkbox"/> No.		
<input type="checkbox"/> Yes. Explain: _____		

Fill in this information to identify your case:

Debtor 1	<u>Anna Chutron</u>
Debtor 2 (Spouse, if filing)	
United States Bankruptcy Court for the:	<u>NORTHERN DISTRICT OF ILLINOIS, EASTERN DIVISION</u>
Case number (If known)	

Check if this is:

An amended filing  
 A supplement showing postpetition chapter 13 expenses as of the following date:

MM / DD / YYYY

## Official Form 106J

### Schedule J: Your Expenses

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

#### Part 1: Describe Your Household

1. Is this a joint case?

No. Go to line 2.  
 Yes. Does Debtor 2 live in a separate household?

No  
 Yes. Debtor 2 must file Official Form 106J-2, Expenses for Separate Household of Debtor 2.

2. Do you have dependents?  No

Do not list Debtor 1 and  
Debtor 2.

Yes. Fill out this information for  
each dependent.....

Dependent's relationship to  
Debtor 1 or Debtor 2

Dependent's  
age

Does dependent  
live with you?

Do not state the  
dependents names.

Son

3

No  
 Yes  
 No  
 Yes  
 No  
 Yes  
 No  
 Yes

Daughter

9

3. Do your expenses include  
expenses of people other than  
yourself and your dependents?  No  
 Yes

#### Part 2: Estimate Your Ongoing Monthly Expenses

Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date.

Include expenses paid for with non-cash government assistance if you know the  
value of such assistance and have included it on Schedule I: Your Income  
(Official Form 106I.)

4. The rental or home ownership expenses for your residence. Include first mortgage  
payments and any rent for the ground or lot.

4. \$ 1,130.00

#### Your expenses

If not included in line 4:

4a. Real estate taxes  
4b. Property, homeowner's, or renter's insurance  
4c. Home maintenance, repair, and upkeep expenses  
4d. Homeowner's association or condominium dues

4a. \$ 0.00  
4b. \$ 0.00  
4c. \$ 0.00  
4d. \$ 0.00  
5. \$ 0.00

Debtor 1 <u>Chutron, Anna</u>	Case number (if known)
<p>6. <b>Utilities:</b></p> <p>6a. Electricity, heat, natural gas      6a. \$ <u>0.00</u>      6b. Water, sewer, garbage collection      6b. \$ <u>0.00</u>      6c. Telephone, cell phone, Internet, satellite, and cable services      6c. \$ <u>110.00</u>      6d. Other. Specify:      6d. \$ <u>0.00</u></p> <p>7. <b>Food and housekeeping supplies</b>      7. \$ <u>500.00</u>      8. <b>Childcare and children's education costs</b>      8. \$ <u>500.00</u>      9. <b>Clothing, laundry, and dry cleaning</b>      9. \$ <u>100.00</u>      10. <b>Personal care products and services</b>      10. \$ <u>0.00</u>      11. <b>Medical and dental expenses</b>      11. \$ <u>0.00</u></p> <p>12. <b>Transportation.</b> Include gas, maintenance, bus or train fare. Do not include car payments.      12. \$ <u>200.00</u></p> <p>13. <b>Entertainment, clubs, recreation, newspapers, magazines, and books</b>      13. \$ <u>0.00</u>      14. <b>Charitable contributions and religious donations</b>      14. \$ <u>0.00</u></p> <p>15. <b>Insurance.</b> Do not include insurance deducted from your pay or included in lines 4 or 20.      15a. Life insurance      15a. \$ <u>0.00</u>      15b. Health insurance      15b. \$ <u>0.00</u>      15c. Vehicle insurance      15c. \$ <u>42.00</u>      15d. Other insurance. Specify:      15d. \$ <u>0.00</u></p> <p>16. <b>Taxes.</b> Do not include taxes deducted from your pay or included in lines 4 or 20. Specify:      16. \$ <u>0.00</u></p> <p>17. <b>Installment or lease payments:</b>      17a. Car payments for Vehicle 1      17a. \$ <u>0.00</u>      17b. Car payments for Vehicle 2      17b. \$ <u>0.00</u>      17c. Other. Specify:      17c. \$ <u>0.00</u>      17d. Other. Specify:      17d. \$ <u>0.00</u></p> <p>18. <b>Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).</b>      18. \$ <u>0.00</u></p> <p>19. <b>Other payments you make to support others who do not live with you.</b> Specify:      19. \$ <u>0.00</u></p> <p>20. <b>Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.</b>      20a. Mortgages on other property      20a. \$ <u>0.00</u>      20b. Real estate taxes      20b. \$ <u>0.00</u>      20c. Property, homeowner's, or renter's insurance      20c. \$ <u>0.00</u>      20d. Maintenance, repair, and upkeep expenses      20d. \$ <u>0.00</u>      20e. Homeowner's association or condominium dues      20e. \$ <u>0.00</u></p> <p>21. <b>Other:</b> Specify:      21. +\$ <u>0.00</u></p> <p>22. <b>Calculate your monthly expenses</b>      22a. Add lines 4 through 21.      \$ <u>2,582.00</u>      22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2      22c. Add line 22a and 22b. The result is your monthly expenses.      \$ <u>2,582.00</u></p> <p>23. <b>Calculate your monthly net income.</b>      23a. Copy line 12 (your combined monthly income) from Schedule I.      23a. \$ <u>2,081.20</u>      23b. Copy your monthly expenses from line 22c above.      23b. -\$ <u>2,582.00</u></p> <p>23c. Subtract your monthly expenses from your monthly income. The result is your monthly net income.      23c. \$ <u>-500.80</u></p> <p>24. <b>Do you expect an increase or decrease in your expenses within the year after you file this form?</b> For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?  <input checked="" type="checkbox"/> No.  <input type="checkbox"/> Yes.      Explain here: _____</p>	

Fill in this information to identify your case:

Debtor 1	<b>Anna Chutron</b>		
	First Name	Middle Name	Last Name
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	NORTHERN DISTRICT OF ILLINOIS, EASTERN DIVISION		
Case number (if known)			

Check if this is an amended filing

Official Form 106Dec

**Declaration About an Individual Debtor's Schedules**

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

**Sign Below**

Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms?

No

Yes. Name of person

Attach *Bankruptcy Petition Preparer's Notice, Declaration, and Signature* (Official Form 119)

Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct.

**X /s/ Anna Chutron**

**Anna Chutron**  
Signature of Debtor 1

Date May 22, 2017

**X**

Signature of Debtor 2

Date \_\_\_\_\_

Fill in this information to identify your case:

Debtor 1	<b>Anna Chutron</b>		
	First Name	Middle Name	Last Name
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	NORTHERN DISTRICT OF ILLINOIS, EASTERN DIVISION		
Case number (if known)			

Check if this is an amended filing

## Official Form 107

### Statement of Financial Affairs for Individuals Filing for Bankruptcy

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

#### Part 1: Give Details About Your Marital Status and Where You Lived Before

1. What is your current marital status?

Married  
 Not married

2. During the last 3 years, have you lived anywhere other than where you live now?

No  
 Yes. List all of the places you lived in the last 3 years. Do not include where you live now.

Debtor 1 Prior Address:

Dates Debtor 1 lived  
there

Debtor 2 Prior Address:

Dates Debtor 2  
lived there

3. Within the last 8 years, did you ever live with a spouse or legal equivalent in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington and Wisconsin.)

No  
 Yes. Make sure you fill out Schedule H: Your Codebtors (Official Form 106H).

#### Part 2 Explain the Sources of Your Income

4. Did you have any income from employment or from operating a business during this year or the two previous calendar years?

Fill in the total amount of income you received from all jobs and all businesses, including part-time activities.  
If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1.

No  
 Yes. Fill in the details.

Debtor 1	Gross income (before deductions and exclusions)	Debtor 2	Gross income (before deductions and exclusions)
Sources of income Check all that apply.		Sources of income Check all that apply.	

From January 1 of current year until  
the date you filed for bankruptcy:

<input type="checkbox"/> Wages, commissions, bonuses, tips	<b>\$8,645.00</b>	<input type="checkbox"/> Wages, commissions, bonuses, tips
<input type="checkbox"/> Operating a business		<input type="checkbox"/> Operating a business

For last calendar year:  
(January 1 to December 31, 2016)

<input checked="" type="checkbox"/> Wages, commissions, bonuses, tips	<b>\$22,928.00</b>	<input type="checkbox"/> Wages, commissions, bonuses, tips
<input type="checkbox"/> Operating a business		<input type="checkbox"/> Operating a business

Debtor 1	Gross income (before deductions and exclusions)	Debtor 2	Gross income (before deductions and exclusions)
<b>Sources of income</b> Check all that apply.		<b>Sources of income</b> Check all that apply.	
For the calendar year before that: <b>(January 1 to December 31, 2015 )</b>	<input type="checkbox"/> Wages, commissions, bonuses, tips <b>\$18,420.00</b>  <input type="checkbox"/> Operating a business	<input type="checkbox"/> Wages, commissions, bonuses, tips  <input type="checkbox"/> Operating a business	

**5. Did you receive any other income during this year or the two previous calendar years?**

Include income regardless of whether that income is taxable. Examples of *other income* are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1.

List each source and the gross income from each source separately. Do not include income that you listed in line 4.

No  
 Yes. Fill in the details.

Debtor 1	Gross income from each source (before deductions and exclusions)	Debtor 2	Gross income (before deductions and exclusions)
<b>Sources of income</b> Describe below.		<b>Sources of income</b> Describe below.	

**Part 3: List Certain Payments You Made Before You Filed for Bankruptcy****6. Are either Debtor 1's or Debtor 2's debts primarily consumer debts?**

No. **Neither Debtor 1 nor Debtor 2 has primarily consumer debts.** Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425\* or more?

No. Go to line 7.  
 Yes. List below each creditor to whom you paid a total of \$6,425\* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

\* Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.

Yes. **Debtor 1 or Debtor 2 or both have primarily consumer debts.**

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more?

No. Go to line 7.  
 Yes. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

Creditor's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Was this payment for ...
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**7. Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider?**

Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony.

No  
 Yes. List all payments to an insider.

Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for this payment
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**8. Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an**

**insider?**

Include payments on debts guaranteed or cosigned by an insider.

No  
 Yes. List all payments to an insider

Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for this payment Include creditor's name
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**Part 4: Identify Legal Actions, Repossessions, and Foreclosures****9. Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding?**

List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes.

No  
 Yes. Fill in the details.

Case title Case number	Nature of the case	Court or agency	Status of the case
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**10. Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied?**

Check all that apply and fill in the details below.

No. Go to line 11.  
 Yes. Fill in the information below.

Creditor Name and Address	Describe the Property	Date	Value of the property
Explain what happened			

**11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt?**

No  
 Yes. Fill in the details.

Creditor Name and Address	Describe the action the creditor took	Date action was taken	Amount
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**12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official?**

No  
 Yes

**Part 5: List Certain Gifts and Contributions****13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person?**

No  
 Yes. Fill in the details for each gift.

Gifts with a total value of more than \$600 per person	Describe the gifts	Dates you gave the gifts	Value
Person to Whom You Gave the Gift and Address:			

**14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity?**

No  
 Yes. Fill in the details for each gift or contribution.

Gifts or contributions to charities that total more than \$600	Charity's Name	Address (Number, Street, City, State and ZIP Code)	Describe what you contributed	Dates you contributed	Value
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**Part 6: List Certain Losses****15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster,**

or gambling?

No  
 Yes. Fill in the details.

**Describe the property you lost and how the loss occurred**

**Describe any insurance coverage for the loss**

Include the amount that insurance has paid. List pending insurance claims on line 33 of *Schedule A/B: Property*.

**Date of your loss**

**Value of property lost**

**Part 7: List Certain Payments or Transfers**

16. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition?

Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy.

No  
 Yes. Fill in the details.

**Person Who Was Paid**

**Address**

**Email or website address**

**Person Who Made the Payment, if Not You**

Law Offices of Mark Sciblio, P.C.

5945 N Elston Ave

Chicago, IL 60646-5504

**Description and value of any property transferred**

0.00

**Date payment or transfer was made**

**Amount of payment**

\$500.00

17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors?

Do not include any payment or transfer that you listed on line 16.

No  
 Yes. Fill in the details.

**Person Who Was Paid**

**Address**

**Description and value of any property transferred**

**Date payment or transfer was made**

**Amount of payment**

18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs?

Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement.

No  
 Yes. Fill in the details.

**Person Who Received Transfer**

**Address**

**Description and value of property transferred**

**Describe any property or payments received or debts paid in exchange**

**Date transfer was made**

**Person's relationship to you**

19. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.)

No  
 Yes. Fill in the details.

**Name of trust**

**Description and value of the property transferred**

**Date Transfer was made**

**Part 8: List of Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units**

20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred?

Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions.

No

Yes. Fill in the details.

Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	Last 4 digits of account number	Type of account or instrument	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
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21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables?

No

Yes. Fill in the details.

Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had access to it? Address (Number, Street, City, State and ZIP Code)	Describe the contents	Do you still have it?
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22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy?

No

Yes. Fill in the details.

Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or had access to it? Address (Number, Street, City, State and ZIP Code)	Describe the contents	Do you still have it?
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**Part 9: Identify Property You Hold or Control for Someone Else**

23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone.

No

Yes. Fill in the details.

Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the property? (Number, Street, City, State and ZIP Code)	Describe the property	Value
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**Part 10: Give Details About Environmental Information**

For the purpose of Part 10, the following definitions apply:

- Environmental law* means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.
- Site* means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.
- Hazardous material* means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?

No

Yes. Fill in the details.

Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice
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## 25. Have you notified any governmental unit of any release of hazardous material?

No  
 Yes. Fill in the details.

Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice
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## 26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.

No  
 Yes. Fill in the details.

Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	Status of the case
---------------------------	---	--------------------	--------------------

**Part 11: Give Details About Your Business or Connections to Any Business**

## 27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business?

A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time  
 A member of a limited liability company (LLC) or limited liability partnership (LLP)  
 A partner in a partnership  
 An officer, director, or managing executive of a corporation  
 An owner of at least 5% of the voting or equity securities of a corporation

No. None of the above applies. Go to Part 12.

Yes. Check all that apply above and fill in the details below for each business.

Business Name Address (Number, Street, City, State and ZIP Code)	Describe the nature of the business Name of accountant or bookkeeper	Employer Identification number Do not include Social Security number or ITIN. Dates business existed
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## 28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties.

No  
 Yes. Fill in the details below.

Name Address (Number, Street, City, State and ZIP Code)	Date Issued
---	-------------

**Part 12: Sign Below**

I have read the answers on this *Statement of Financial Affairs* and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both.  
 18 U.S.C. §§ 152, 1341, 1519, and 3571.

*/s/ Anna Chutron*

**Anna Chutron**  
 Signature of Debtor 1

**Signature of Debtor 2**Date May 22, 2017

Date \_\_\_\_\_

Did you attach additional pages to Your *Statement of Financial Affairs for Individuals Filing for Bankruptcy* (Official Form 107)?

No  
 Yes

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

No

Yes. Name of Person \_\_\_\_\_. Attach the *Bankruptcy Petition Preparer's Notice, Declaration, and Signature* (Official Form 119).

**United States Bankruptcy Court  
Northern District of Illinois, Eastern Division**

In re **Chutron, Anna**

Debtor(s)

Case No.  
Chapter

7

**DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR**

1. Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:

For legal services, I have agreed to accept .....	\$ <b>1,638.00</b>
Prior to the filing of this statement I have received .....	\$ <b>500.00</b>
Balance Due .....	\$ <b>1,138.00</b>

2. The source of the compensation paid to me was:

Debtor  Other (specify):

3. The source of compensation to be paid to me is:

Debtor  Other (specify):

4.  I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.

I have agreed to share the above-disclosed compensation with a person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation is attached.

5. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:

- Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;
- Preparation and filing of any petition, schedules, statement of affairs and plan which may be required;
- Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;
- [Other provisions as needed]

6. By agreement with the debtor(s), the above-disclosed fee does not include the following service:

**CERTIFICATION**

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

May 22, 2017

Date

/s/ Mark Sciblo

**Mark Sciblo**

*Signature of Attorney*

**Law Offices of Mark Sciblo, P.C.**

**5945 N Elston Ave  
Chicago, IL 60646-5504**

**attorney@sciblolawoffice.com**

*Name of law firm*